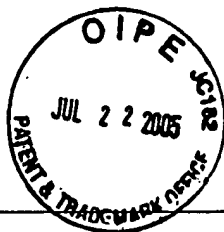


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Complete if Known

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Filing Date September 28, 2001

First Named Inventor Mithat C. Dogan.

Group Art Unit 2637

Examiner Name Chang, Edith M.

Sheet 1 of 1

Attorney Docket No: 15685P050

US PATENT DOCUMENTS

Examiner Initial *	Cite No. *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
eh		US-20020181509	12/05/2002	Mody, , et al.	
eh		US-20020193078	12/09/2002	MacFarlane, Shearer, , et al.	
eh		US-20030021332	01/30/2003	Li, Ye	
eh		US-20030081705	05/01/2003	Miller, William J.	
eh		US-5,103,427	04/07/1992	Erdol, , et al.	
eh		US-5,828,658	10/27/1998	Ottersten, , et al.	
eh		US-6,104,761	08/15/2000	McCallister, , et al.	
eh		US-6,208,630	03/27/2001	Cooley, David M., et al.	
eh		US-6,738,443	05/18/2004	Bohnke, , et al.	

FOREIGN PATENT DOCUMENTS

Examiner Initials *	Cite No. *	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ²
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OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

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Filed: July 18, 2005

EXAMINER

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12/14/2005

Substitute Disclosure Statement Form (PTO-1449)

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